

Utah Insurance Department
State Office Building, Rm 3110
Salt Lake City, UT 84114
Telephone (801)538-3800
Cathy Burton
Telephone (801) 537-9113

**BEFORE THE INSURANCE COMMISSIONER
STATE OF UTAH**

COMPLAINANT:
UTAH INSURANCE DEPARTMENT

RESPONDENT:
SUPERIOR BAIL BONDS
PO BOX 1711
BOUNTIFUL, UTAH 84011

License No. 344025

**NOTICE OF INFORMAL
AGENCY ACTION
AND ORDER**

Docket No. 3636
Enf. Case No. 2014-087 BB
Judge Mark Kleinfeld
Administrative Law Judge

The Utah Insurance Department has commenced this informal adjudicative proceeding pursuant to Utah Code Ann. § 31A-2-201, 31A-3-103 and 63G-4-201 and Utah Admin. Code R590-102. Based upon information contained in agency files or known to the Department, the Department asserts the following facts:

FACTS

1. Respondent is a licensed resident limited line producer organization authorized to do the business of insurance in the State of Utah holding License Number 344025.
2. Respondent failed to properly respond to an inquiry of the Commissioner, dated May 27, 2015, and sent to Respondent's following address on file with the Department: PO Box 1711, Bountiful, Utah 84011 and emailed to superiorbailbonds@gmail.com. Response was due on June 29, 2015.

3. Respondent's attorney Eric Lind, emailed a request dated June 26, 2015 asking for a later date for the response. The request was granted, with the date of July 10, 2015 given.

4. Respondent's attorney Eric Lind, emailed a request dated July 9, 2015 asking for a later date for the response. The request was granted, with the date of July 17, 2015 given.

5. Respondent failed to provide the requested information on July 17, 2015.

BASED UPON THE FOREGOING FACTS

Based upon the foregoing facts, the Commissioner now enters the following Order:

ORDER

IT IS HEREBY ORDERED:

1. Respondent's is assessed an administrative forfeiture in the amount of \$500.00. Said forfeiture shall be paid no later than ten (10) days after the date this Order becomes final.

2. Respondent shall provide a substantive response to the Commissioner's inquiries regarding the lack of payment of fees.

3. This Order shall become final fifteen (15) days after the date of mailing unless a written request for a hearing is received from the Respondent in the offices of the Department prior to that date. A written request for a hearing shall be signed by the person making the request and shall state the basis for the relief requested.

NOTIFICATION

If you request a hearing regarding this matter, please contact the Examiner, Cathy Burton, at 801-537-9113. Failure to request a hearing will be considered a failure to exhaust

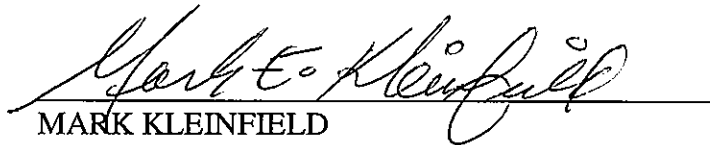
administrative remedies and will preclude any further administrative or judicial review or appeal of this matter.

You are further notified that a failure to obey an Order of the commissioner may subject you to further penalties, including forfeitures of up to \$2,500.00 per violation and the suspension or revocation of your license and the filing of an action to enforce this Order in District Court, which may impose forfeitures of up to \$10,000.00 per day for continued violation.

You are further notified that other jurisdictions in which you may be licensed may require that you report this action to them.

DATED THIS 4 day of August, 2015.

TODD E. KISER
INSURANCE COMMISSIONER

A handwritten signature in cursive script, reading "Mark E. Kleinfeld", is written over a horizontal line.

MARK KLEINFELD
Administrative Law Judge
Utah Insurance Department
State Office Building, Room 3110
Salt Lake City, Utah 84114
Telephone (801) 538-3800

NOTIFICATION

If you request a hearing regarding this matter, please contact the Examiner, Cathy Burton, at 801-537-9113. Failure to request a hearing will be considered a failure to exhaust administrative remedies and will preclude any further administrative or judicial review or appeal of this matter.

You are further notified that a failure to obey an Order of the commissioner may subject you to further penalties, including forfeitures of up to \$2,500.00 per violation and the suspension or revocation of your license and the filing of an action to enforce this Order in District Court, which may impose forfeitures of up to \$10,000.00 per day for continued violation.


You are further notified that other jurisdictions in which you may be licensed may require that you report this action to them.

CERTIFICATE OF MAILING

The undersigned certifies on this date, a true and correct copy of the forgoing NOTICE OF INFORMAL AGENCY ACTION AND ORDER was mailed, postage prepaid, to the following:

Superior Bail Bonds
P. O. Box 1171
Bountiful, UT 84011
&
superiorbailbonds@gmail.com

DATED this 4th August, 2015


LINDA HARDY
UTAH INSURANCE DEPARTMENT
STATE OFFICE BUILDING, ROOM 3110
SALT LAKE CITY, UT 84114-6901



State of Utah

GARY R. HERBERT
Governor

SPENCER J. COX
Lieutenant Governor

Insurance Department

**UTAH
Invoice - Original**

SUPERIOR BAIL BONDS
PO BOX 1711
BOUNTIFUL UT 84011

Printed Date: August 3, 2015
Invoice Date: August 3, 2015
Balance Due: \$500.00
Due Date: September 7, 2015
Invoice ID: 786302
Payor ID: 163265

Date	Item Description	Amount	
08-03-2015	Bail Bond Forfeitures and Fines	\$500.00	E-Case 3636 Docket # 2015-087 BB

No Adjustments

No Payments

Balance Amount Due \$500.00

**UTAH
Invoice - Original**

Make check payable to: Utah Insurance Department
Send payment to:
Utah Insurance Department
3110 State Office Building
Salt Lake City, UT 84114-6901

Invoice Date: August 3, 2015
Balance Due: \$500.00
Due Date: September 7, 2015
Invoice ID: 786302
Payor ID: 163265

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**Detach and Return this Voucher with Payment
Payments Will Not Be Processed without Voucher**